Annual Reporting Requirements pursuant to § 54.313(a)(2)-(6)

	WC Docket No. 10-90						
	§ 54.313	(a)(2) – Outage reporting					
		My company was not required to collect this information in 2011.					
-	X	My company collected this information pursuant to state utility commission requirement. A copy of the report is attached.					
	§ 54.313(a)(3) – Unfulfilled service requests						
general	greente-to-to-to-to-to-to-to-to-to-to-to-to-to-	My company was not required to collect this information in 2011.					
	Cumpignessonal Accessed pyrates 2	My company collected this information pursuant to state utility commission requirement. A copy of the report is attached.					
	§ 54.313	a)(4) – Customer complaints per 1000 connections					
	X	My company was not required to collect this information in 2011.					

§ 54.313(a)(5) - Service quality standards and consumer protection rules

I certify that the reporting carrier is in compliance with applicable service quality standards and consumer protection rules.

My company collected this information pursuant to state utility commission requirement.

§ 54.313(a)(6) – Ability to function in emergency situations

A copy of the report is attached.

I certify that the reporting carrier can function in emergency situations as set forth in 47 CFR §54.202(a)(2). Specifically, the reporting carrier has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.

I am authorized to make this certification on behalf of the company named above and, to the best of my knowledge the information reported on this form is accurate. This certification is for the study area(s) listed below. (Please enter your Company Name, State and Study Area Code)

Company Name	State	Study Area Code
Union River Telephone Company	Maine	100027

(If necessary, attach a separate list of additional study areas and check this box.)

Signed,

William S. Silsby, Jr.

[Printed Name of Corporate Officer]

Vice President/General Mgr

[Title of Corporate Officer]

Carrier's Name Union River Telephone Company Carrier's Address P.O. Box 100, Aurora, ME 04408-0100 Carrier's Telephone Number (207) 584-9911

Date:

06/22/2012

Maine Service Quality Report Report Period: 4th Quarter 2011

Reporting Company: Union River Telephone Company

						2nd	3rd	Annual	
				Current	Prior	Quarter	Quarter	Rolling	
Performance area	Oct	Nov	Dec	Quarter	Quarter	Prior	Prior	Average	
1 Network Trouble Report Rate									
A:#Network Trouble Reports Res and Bus	6	9	29	44	100	67	23	58.50	
B: # Lines	1,203	1,175	1,169	3,547	3,799	3,656	3,514	3,629	
C: (A/B) X 100	0.50	0.77	2.48	1.24	2.63	1.83	0.65	1.61	
2 % Troubles not cleared w/I 24 hurs Res and Bus									
A: Total Troubles not cleared w/I 24 hours	1	4	3	8	9	11	2	7.50	
B: Total # Troubles	6	9	29	44	100	67	23	58.50	
C: (A/B)	17%	44%	10%	18%	9%	16%	9%	13%	
3 % Instal appt not met comp reasons Res and Bus									
A: Total Instal Appt Not Met Co. reason Res&Bus	. 0	0	0	. 0	, 0	. 0	0	0.00	
B: Total Installation Appointments	12	8	2	22	33	94	15	41.00	
C: (A/B)	0%	0%	0%	0%	-0%	0%	0%	0%	
4 Average delay days for missed appts Res and Bus									
A: Total # of delay days	0	0	0	0	0	0	0	0	5
B:Total # of missed appts.	0	0	0	0	0	0	0	0	
C: (A/B)									
5 # of Major Service Outages	0	0	0	0	0	0	0	0	

Report due April 15, July 15, Oct. 15 etc

Person filling out this form: David Pelletier

Phone: 207-584-9950 Fax: 207-584-9997

E-mail: dpelletier@rivah.net

2011 ANNUAL REPORT OF CREDIT AND COLLECTION ACTIVITIES (for all Eligible Telecommunications Carriers)

UNION RIVER TELEPHONE COMPANY PO BOX 100 AURORA, ME 04408 - 0100

Reporting Requirements. Chapter 290, Standards for Billing, Credit and Collection, and Customer Information for Eligible Telecommunications Carriers Providing Basic Telephone Service, Section 19(B) requires every ETC to submit credit and collection information annually to the Maine Public Utilities Commission. As shown below, information for residential and non-residential accounts must be listed separately. The information provided will be used to track and evaluate the effectiveness of residential and non-residential credit and collection programs.

Please return your completed report form by April 2, 2012 to:

Consumer Assistance Division Maine Public Utilities Commission 18 State House Station Augusta, ME 04333-0018

Pr	repared by: PRISCILLA Flaighton	Tel. No.: <u>207 58U 99</u> 1
1.	Please enter the average number of accounts for the year:	
	Residential accounts:	1137
	Non-residential accounts:	104
	Note: To obtain the annual average, add the month-end to different method is used, please explain your method	

2. Please enter the number of disconnection notices issued:

	Residential	Non-residential
January	44	"
February	54	
March	49	
April	35	
May	.38	
June	44	
July	49	
August	55	
September	38	
October	52	
November	51	
December _.	. 56	
TOTAL	. 573	9

3. Please enter the number of actual disconnections for any reason other than at the customer's request:

	Residential	Non-residential
January	7	
February	Y	Anguy - pengapanan Anguy - Penga
March	1	
April	6	
May	H	
June)	3
July	.5	
August	10	
September	10	
October	8	
November	10	
December	7	
TOTAL	92	

4. Please enter the number of reconnections following disconnection without consent:

	Residential	Non-residential
January	6	r
February	Y	
March	8	
April	25	
May	7	
June	Q	
July	.5	
August	q	
September	8	
October	6	
November	5	
December	. 2	
TOTAL	72	

5. Please enter the number of deposits requested and received, and their average dollar amount for the year:

от били постоят в стибова доброгор сородного под объерина в сего подгороборового подоворов подовор образор до до дого дого дого под	Residential	Non-residential
Deposits requested	0	0
Average amount of deposits requested	\$	\$
Deposits received	0	0
Average amount of deposits received	\$	\$

6. Please enter the number of applications for service denied for the year:		
	Residential applications:	. ()
	Non-residential applications:	. 0